THE UNITED STATES PATENT AND TRADEMARK OFFICE

Atty. Docket: VALC / 237A

Applicant:

THOMPSON, David

RETAIL FURNITURE STORE CONFIGURATION AND METHOD

| <u>CERTIFI</u> | ICATE OF MAILING BY EXPRESS MAIL - 37 CFR 1 | 1.10 |
|---------------------------------------------------------------------------|---------------------------------------------|------|
| 'Express Mail' mailing label number: Date of Deposit: February 5, 2004 | EV355033854US | |

I certify that this paper or fee (along with the enclosures noted herein) is being deposited with the United States Postal Service 'Express Mail Post Office to Addressee' service under 37 CFR 1.10 on the above date and is addressed to the Commissioner for

Patents, P.O. Box 1450, Alexandria, VA 22313-1450:

By: Kenneth Eads (person mailing paper)

UTILITY PATENT APPLICATION TRANSMITTAL

Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

This is a request for filing, under 37 CFR § 1.53(b), a(n):

- **☑** Original (non-provisional) application.
- ☐ Divisional of prior application Serial No. ___, filed on ___.
- □ Continuation of prior application Serial No. __, filed on ___
- □ Continuation-in-part of prior application Serial No. ___, filed on ___.

PRELIMINARY AMENDMENT/CALCULATION OF FEES

- □ Please cancel claims __ without prejudice, and prior to calculating the fees. __ total claim(s), of which __ is(are) independent, is(are) pending after the amendment.
- □ Please enter the enclosed preliminary amendment identified below prior to calculating the fees. ___ total claim(s), of which __ is(are) independent, is(are) pending after the amendment.
- □ Small Entity Status is Requested
- **☒** The Fees are Calculated as Follows:

| Fee: | Number of Claims: | In Excess of: | Extra: | At Rate: | Amount: |
|---------------------------------------------|-------------------|---------------|--------|----------|------------|
| Total Claims | 29 | 20 | 9 | \$18 | \$162.00 |
| Independent Claims | 6 | 3 | 3 | \$86 | \$258.00 |
| MULTIPLE DEPENDENT CLAIM FEE | | | | | |
| BASIC FEE | | | | | |
| TOTAL OF ABOVE CALCULATIONS | | | | | |
| REDUCTION BY 50% FOR FILING BY SMALL ENTITY | | | | | |
| TOTAL | | | | | \$1,190.00 |

ENCLOSURES

| ☒ | Utility Patent Application Transmittal Form containing Certificate of Mailing By Express Mail Under 37 CFR 1.10. | | | | | |
|-------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|
| \boxtimes | Return Postcard. | | | | | |
| <u>AP</u> | PLICATION PAPERS | | | | | |
| × | Utility Patent Application, with: cover sheet, <u>35</u> page(s) specification (including <u>29</u> total claim(s), of which <u>6</u> is(are) independent, and <u>1</u> page(s) abstract). | | | | | |
| \boxtimes | Drawings: 2 sheet(s) of formal drawings (2 total figure(s)). | | | | | |
| | Microfiche Computer Program (Appendix). | | | | | |
| | Nucleotide and/or Amino Acid Sequence, including (all are necessary): Computer Readable Copy, Paper Copy (identical to computer copy), and Statement verifying identity of copies. | | | | | |
| × | An <u>Unsigned</u> Declaration, Power of Attorney and Petition Form. | | | | | |
| | Copy of Executed Declaration, Power of Attorney and Petition Form from prior application identified above. | | | | | |
| | Certified Copy of priority document(s) identified as attached above. | | | | | |
| <u>AD</u> | DITIONAL PAPERS | | | | | |
| | Assignment to, Recordation Cover Sheet (Form PTO-1595) | | | | | |
| | Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(i) | | | | | |
| | Preliminary Amendment (to be entered prior to calculation of fees) | | | | | |
| | Information Disclosure Statement, sheet(s) Form PTO-1449, U.S. Patent Reference(s), Foreign Patent Reference(s) and Other Reference(s) | | | | | |
| | Other: | | | | | |
| <u>CH</u> | <u>'ECKS</u> | | | | | |
| | A Check of for the filing fee. | | | | | |
| | A Check of for the assignment recording fee | | | | | |

DEPOSIT ACCOUNT AUTHORIZATION

| | Please charg | e Deposit Account No | o in the amount of |
|--|--------------|----------------------|--------------------|
|--|--------------|----------------------|--------------------|

- ☐ The Commissioner is authorized to charge any fees under 37 CFR 1.16 and 1.17 which may be required during the entire pendency of the application, or credit any overpayment, to Deposit Account No. __. A duplicate of this transmittal is attached.
- oxdiv The payment of fees is being deferred.

Respectfully Submitted,

Reg. No. 44,363

Wesley L. Strickland (VA, DC Bar only)

WOOD, HERRON & EVANS, L.L.P. 2700 Carew Tower 441 Vine St. Cincinnati, Ohio 45202 (513) 241-2324

WLS/khb